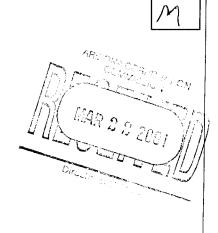
ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

W-02267A WATER
DONALD & STEVEN MCADAMS
MCADAMS WATER COMPANY
50644 N 33RD AVE
PHOENIX AZ 85027-0000



ANNUAL REPORT

FOR YEAR ENDING

12 31 2000

FOR COMMISSION USE

COMPANY INFORMATION

Company Name (Business Name)	Steve McAdam	· Mata. C.
Company Name (Business Name)	JICOE MANA	s ware o.
Mailing Address / 0434	230=17	
Mailing Address / 0439 (Street) (City)	Towa	52550
(City)	(State)	(Zip)
641-634- 3/06 Telephone No. (Include Area Code)		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address		
Local Office Mailing Address 50	644 No. 33 20 K	Jac
Local Office Mailing Address	(Street)	85087
(Ćity)	(State)	(Zip)
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address		
MAN	NAGEMENT INFORMATI	ON
	NAGEMENT INFORMATI	<u>ON</u>
MAN Management Contact:		
	NAGEMENT INFORMATI (Name)	ON (Title)
Management Contact:	(Name)	(Title)
Management Contact: (Street) Telephone No. (Include Area Code) Email Address	(Name) (City) Fax No. (Include Area Code)	(Title) (State) (Zip)
Management Contact: (Street) Telephone No. (Include Area Code) Email Address	(Name) (City) Fax No. (Include Area Code)	(Title) (State) (Zip)
Management Contact: (Street) Telephone No. (Include Area Code) Email Address On Site Manager:	(Name) (City) Fax No. (Include Area Code) Manager Adams (Name)	(Title) (State) (Zip) Pager/Cell No. (Include Area Code)
Management Contact: (Street) Telephone No. (Include Area Code) Email Address	(Name) (City) Fax No. (Include Area Code) Manager Adams (Name)	(Title) (State) (Zip)
Management Contact: (Street) Telephone No. (Include Area Code) Email Address On Site Manager: Don Sobyy No. 332	(Name) (City) Fax No. (Include Area Code) MAdams (Name) OAul Phy, (City)	(Title) (State) (Zip) Pager/Cell No. (Include Area Code)
Management Contact: (Street) Telephone No. (Include Area Code) Email Address On Site Manager: Don 50644 No. 33	(Name) (City) Fax No. (Include Area Code) MAdams (Name) OAul Phy, (City)	(Title) (State) (Zip) Pager/Cell No. (Include Area Code)
Management Contact: (Street) Telephone No. (Include Area Code) Email Address On Site Manager: Don Sobyy No. 33 (Street) 603-465-757/ Telephone No. (Include Area Code)	(Name) (City) Fax No. (Include Area Code) MAdams (Name) OAul Phy, (City)	(Title) (State) (Zip) Pager/Cell No. (Include Area Code) A 2 8 50 8 7 (State) (Zip)

Statuta and America			
Statutory Agent:	(Name)		
		(6)	
(Street)	(City)	(State)	(Zip)
Telephone No. (Include Area Code)	Fax No. (Include Area Code	Pager/Cell No. (Include Area Code)
Attorney:			
	(Name)		
(Street)	(City)	(State)	(Zip)
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (I	nclude Area Code)
OWI	NERSHIP INFORMATIC	<u>N</u>	
Check the following box that applies to y	our company:		
Sole Proprietor (S)	C Corporation (C) (Other than Ass	ociation/Co-op)
Partnership (P)	Subchapter S Cor	poration (Z)	
☐ Bankruptcy (B)	Association/Co op	(A)	
Receivership (R)	Limited Liability	Company	
Other (Describe)			
	COUNTIES SERVED		
Check the box below for the county/ies in	n which you are certificated to pro	ovide service:	
П АРАСНЕ	☐ COCHISE		ONINO
☐ GILA	☐ GRAHAM	☐ GREE	CNLEE
☐ LA PAZ	MARICOPA	□ МОН	AVE
☐ NAVAJO	☐ PIMA	☐ PINA	L
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUM	A
☐ STATEWIDE			

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights	3200		
304	Structures and Improvements			
307	Wells and Springs	1349.		
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	17/2 9559 755 393		
331	Transmission and Distribution Mains	9559		
333	Services	755		
334	Meters and Meter Installations	393		
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS			

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			3010
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			7 - 7 - 6 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS			4.

This amount goes on Comparative Statement of Income and Expense Acct. No. 403.

BALANCE SHEET

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	ASSETS	YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$	\$
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS		
A A A A A A A A A A A A A A A A A A A		\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$	\$
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$	\$

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT	BALANCE AT
NO.	I I A DIL POLEC	BEGINNING OF YEAR	END OF YEAR
	LIABILITIES	ILAK	IEAR
	CURRENT LIABILITES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		Ψ
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG TERM DERT (Orion 12 Mondo)		
224	LONG-TERM DEBT (Over 12 Months) Long-Term Notes and Bonds	\$	Φ
	Long-Term Notes and Bonds	\$	\$
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
	TOTAL LIABILITIES	Φ	D .
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
7 77, 45.	TOTAL LIABILITIES AND CAPITAL	\$	\$

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 2860	\$ 2920,
460	Unmetered Water Revenue		
474	Other Water Revenues		
	TOTAL REVENUES	\$	\$
	OPERATING EXPENSES		
601	Salaries and Wages	\$ 4/5	\$ 565
610	Purchased Water		
615	Purchased Power	1049	793.
618	Chemicals		
620	Repairs and Maintenance	5709	434.
621	Office Supplies and Expense	50	62,
630	Outside Services		
635	Water Testing	45	45
641	Rents		
650	Transportation Expenses	175	2/1,
657	Insurance – General Liability	326,	370,
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense		50.
403	Depreciation Expense		
408	Taxes Other Than Income	186,	169.
408.11	Property Taxes	1020	169. 963.
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$	\$ 3662.
	OTHER INCOME/EXPENSE		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/EXP	\$	\$
	NET INCOME/(LOSS)	\$ (6165)	\$ (742)

Taxo Paul# 202-06-0299 - \$831, #635-49-707- \frac{132}{963}

COME	'AN	$[\mathbf{Y}]$	${f NA}$	ΜE
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SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate				
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End	\$
Meter Deposits Refunded During the Test Year	\$

WATER COMPANY PLANT DESCRIPTION

WELLS

Pump Horsepower	Pump Yield (Gpm)	Casing Size (inches)	Meter Size (inches)
1/2-1/2	750	8"	Rockwell 1/5"
			
	Horsepower	Horsepower (Gpm)	Horsepower (Gpm) (inches)

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

TOTAL GALLONS PUMPED (NOT SOLD) THIS YEAR (thous.) =

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other

STORAGE T	STORAGE TANKS		E TANKS
Capacity	Quantity	Capacity	Quantity
		5000	

STATISTICAL INFORMATION

Total number of customers	6	
Total number of gallons sold _	656,515 gol.	gallons

COMPANY NAME Steve Mc Codans Water Go. YEAR ENDING 12/31/2000

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2000 was: \$ 6248.

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. Total Property Taxes Ren A

was - \$6248.

Water Co Portion # 202-06-0279# 635-49-707

Ather facel are
\$\frac{4}{202-06-660C-1}\$
\$\begin{pmatrix} 034-3 \\ 060D-0 \\ 070-0 \\ 054-6 \end{pmatrix}\$

YEAR ENDING 12/31/2000
OME TAXES
A Loss Always
•
ill refund any excess gross-up funds collected at the close of ant to this Decision, if gross-up tax refunds are due to any een made, attach the following information by Payer: name f gross-up tax collected, the amount of refund due to each s made the refund to the Payer.
s refunded to Payers all gross-up tax refunds reported in the be signed by the President or Chief Executive Officer, if a partnership; the managing member, if a limited liability hip.
DATE
DATE
TITLE
i i

TO:

Comeradied **DONNA McADAMS**

FROM:

Carmen Madrid

DATE:

May 22, 2001

RE:

MISSING INFORMATION FOR ANNUAL

REPORT

PLEASE COMPLETE THE INFORMATION NEEDED ON BOTH THE VERIFICATION AND SWORN STATEMENTS THAT ARE ENCLOSED. I HAVE HIGHLIGHTED THE SPACE FOR THE INFORMATION THAT IS NEEDED.

ALSO, PLEASE SEND COPY OF CANCELLED CHECK FOR PROPERTY TAXES THAT WERE PAID.

I AM ENCLOSING A SELF-ADDRESSED ENVELOPE FOR YOUR USE IN MAILING BACK THE REQUESTED DOCUMENTS.

COMPANY NAME	McAdams	Water lo

If no property taxes paid, explain reasons below:

YEAR ENDING 12/31/2000

WATER AND SEWER UTILITIES ONLY

PROPERTY TAXES

FROFERITIALS
Indicate the amount of actual property taxes paid during this reporting period (Calendar Year 2000)
s <u>6248</u>
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled Checks for property tax payments) of any and all property taxes paid during the calendar year.

VERIFICATION AND **SWORN STATEMENT Intrastate Revenues Only**



		Director of Utilities
STATE OF	COUNTY OF (COUNTY N	NAME)
, THE UNDERSIGNED	NAME (OWNER OR OFF	FICIAL) TITLE
OF THE	COMPANY NAME	
OO SAY THAT THIS ANNUAL U	<u></u>	T TO THE ARIZONA COPRORATION COMMISSION
OR THE YEAR ENDING	12	DAY YEAR 31 2000
PAPERS AND RECORI THE SAME, AND DE STATEMENT OF BUS COVERED BY THIS RE	OS OF SAID U CLARE THE INESS AND A PORT IN RESE	Y DIRECTION, FROM THE ORIGINAL BOOTILITY; THAT I HAVE CAREFULLY EXAMI SAME TO BE A COMPLETE AND CORRAFFAIRS OF SAID UTILITY FOR THE PERPECT TO EACH AND EVERY MATTER AND THE NOWLEDGE, INFORMATION AND BELIEF.
WORN STATEMENT		
		TILITY DERIVED FROM ARIZONA INTRAST LENDAR YEAR 2000 WAS: Arizona IntraState Gross Operating Revenues Only (\$)
		\$
	Ì	(THE AMOUNT IN BOX ABOVE INCLUDES \$IN SALES TAXES BILLED, OR COLLECTED
*REVENUE REPORTED ON THIS PAGE INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER RETHE REVENUE REPORTED ABOVE DAGREE WITH TOTAL OPERATING RELSEWHERE REPORTED, ATTACH TO STATEMENTS THAT RECONCILE TO DIFFERENCE. (EXPLAIN IN DETAIL)	E MUST EASON, OES NOT EVENUES THOSE AE TI	(THE AMOUNT IN BOX ABOVE INCLUDES \$
INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER RITHE REVENUE REPORTED ABOVE DAGREE WITH TOTAL OPERATING RELSEWHERE REPORTED, ATTACH TOTAL THAT RECONCILE TO DIFFERENCE. (EXPLAIN IN DETAIL) SUBSCRIBED AND SWORN TO BEFORE	E MUST E ASON, OES NOT EVENUES THOSE HE RE ME	(THE AMOUNT IN BOX ABOVE INCLUDES \$
INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER RITHE REVENUE REPORTED ABOVE DAGREE WITH TOTAL OPERATING RELSEWHERE REPORTED, ATTACH TOTAL THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL) SUBSCRIBED AND SWORN TO BEFORE A NOTARY PUBLIC IN AND FOR THE	E MUST EASON, OES NOT EVENUES THOSE HE RE ME COUNTY OF	(THE AMOUNT IN BOX ABOVE INCLUDES \$ IN SALES TAXES BILLED, OR COLLECTED SIGNATURE OF OWNER OR OFFICIAL 641-624-3166 TELEPHONE NUMBER COUNTY NAME KEAKUK
INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER RITHE REVENUE REPORTED ABOVE DAGREE WITH TOTAL OPERATING RELSEWHERE REPORTED, ATTACH TOTAL THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL) SUBSCRIBED AND SWORN TO BEFORE A NOTARY PUBLIC IN AND FOR THE	E MUST E ASON, OES NOT EVENUES THOSE HE RE ME	(THE AMOUNT IN BOX ABOVE INCLUDES \$

VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE

INTRASTATE REVENUES ONLY

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

	11 11 200 1111
(COUNTY NAME)	Diferior
NAME (OWNER OR OFFICIAL)	TITLE Direct Outlines
COMPANY NAME	
3011.72.17.11.12	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING MONTH DAY YEAR 2000

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2000 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES	(THE AMOUNT IN BOX AT LEFT INCLUDES \$ IN SALES TAXES BILLED, OR COLLECTED		
*RESIDENTIAL REVENUE REPORTED ON THIS MUST INCLUDE SALES TAXES BILLED.	SPAGE X	SIGNATURE OF OWN	IER OR OFFICIAL
SUBSCRIBED AND SWORN TO BEFO		NOTARY PUBLIC NAME COUNTY NAME	
	AY OF	MONTH	. 20
(SEAL) MY COMMISSION EXPIRES	X	SIGNATURE (OF NOTARY PUBLIC

WILLIAM A. MUNDELL CHAIRMAN JIM IRVIN COMMISSIONER MARC SPITZER COMMISSIONER



ARIZONA CORPORATION COMMISSION

April 30, 2001



Dear Public Service Provider:

As a public service corporation in Arizona, you are required to file an annual report to the Arizona Corporation Commission. pursuant to A.R.S. Section 40-204. Our records indicate that your Company has not filed its "2000 Annual Report".

Pursuant to the Arizona Administrative Code:

All utilities shall submit an annual report to the Commission on a form prescribed by it. The annual report shall be filed on or before the 15th day of April for the preceding CALENDAR YEAR.

Failure to file the annual report is in violation of Commission's Rules. Violation of this Rule will cause Staff to recommend to the Commission that it take enforcement action in the form of a Complaint and Order to Show Cause, which may include fines and penalties being assessed.

This letter is your first past due notice reminder to file the 2000 annual report on or before May 15, 2001 before any enforcement action is taken. NO EXTENSION WILL BE GRANTED.

Please send the annual report to the following:

CARMEN MADRID, ANNUAL REPORT ADMINISTRATOR UTILITIES DIVISION ARIZONA CORPORATION COMMISSION **STE 206** 1200 WEST WASHINGTON PHOENIX, ARIZONA 85007

If you have any questions you may contact me at (602) 542-0848.

This report was sent to you Sincerely weeks ago - Please check our Carmen Madrick

Carmen Madrid

Annual Report Administrator

Utilities Division
Worne McCalana
Water Cos

Stand McCalana 2000 WEST WASHINGTON: PHOENIX, ARIZONA 85007-2996 / 400 WEST CONGRESS STREET: TUCSON, ARIZONA 85701-1347 www.cc.state.az.us

Mand River Az